

County: Polk

Facility ID: 5000

Page 1

L. O. SIMENSTAD NURSING UNIT
301 RIVER STREET, BOX 218

OSCEOLA 54020 Phone: (715) 294-5641

Owned from 1/1 To 12/31 Days of Operation: 365

Operate in Conjunction with Hospital? Yes

Number of Beds Set Up and Staffed (12/31/03): 40

Total Licensed Bed Capacity (12/31/03): 40

Number of Residents on 12/31/03: 37

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified?

Title 19 (Medicaid) Certified?

Average Daily Census:

Non-Profit Corporation

Skilled

No

No

Yes

38

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		21.6
Supp. Home Care-Personal Care	No					1 - 4 Years		56.8
Supp. Home Care-Household Services	No	Developmental Disabilities	2.7	Under 65	0.0	More Than 4 Years		18.9
Day Services	No	Mental Illness (Org./Psy)	54.1	65 - 74	18.9			-----
Respite Care	No	Mental Illness (Other)	5.4	75 - 84	32.4			97.3
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	29.7	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	18.9	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	18.9	65 & Over	100.0	-----		
Transportation	No	Cerebrovascular	13.5		-----	RNs		14.2
Referral Service	No	Diabetes	0.0	Gender	%	LPNs		10.8
Other Services	No	Respiratory	2.7		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	2.7	Male	29.7	Aides, & Orderlies		
Mentally Ill	No		-----	Female	70.3			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)		Medicaid (Title 19)		Other		Private Pay		Family Care		Managed Care						Total	%
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Resi- dents	Of All
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Skilled Care	0	0.0	0	19	90.5	129	0	0.0	0	16	100.0	143	0	0.0	0	0	0.0	35	94.6
Intermediate	---	---	---	2	9.5	106	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	2	5.4
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	0	0.0		21	100.0		0	0.0		16	100.0		0	0.0		0	0.0	37	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
		-----			-----	
Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	33.3	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	16.7	Bathing	0.0	43.2	56.8	37
Other Nursing Homes	5.6	Dressing	13.5	29.7	56.8	37
Acute Care Hospitals	27.8	Transferring	27.0	64.9	8.1	37
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	27.0	29.7	43.2	37
Rehabilitation Hospitals	0.0	Eating	67.6	21.6	10.8	37
Other Locations	16.7	*****				
Total Number of Admissions	18	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	0.0		Receiving Respiratory Care	2.7
Private Home/No Home Health	5.0	Occ/Freq. Incontinent of Bladder	64.9		Receiving Tracheostomy Care	0.0
Private Home/With Home Health	30.0	Occ/Freq. Incontinent of Bowel	54.1		Receiving Suctioning	0.0
Other Nursing Homes	10.0				Receiving Ostomy Care	2.7
Acute Care Hospitals	10.0	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	29.7
Rehabilitation Hospitals	0.0					
Other Locations	0.0	Skin Care			Other Resident Characteristics	
Deaths	45.0	With Pressure Sores	0.0		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	21.6		Medications	
(Including Deaths)	20				Receiving Psychoactive Drugs	51.4

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities					

	This Facility	Other Hospital-Based Facilities	All Facilities		
	%	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	95.0	90.1	1.05	87.4	1.09
Current Residents from In-County	56.8	83.8	0.68	76.7	0.74
Admissions from In-County, Still Residing	38.9	14.2	2.75	19.6	1.98
Admissions/Average Daily Census	47.4	229.5	0.21	141.3	0.34
Discharges/Average Daily Census	52.6	229.2	0.23	142.5	0.37
Discharges To Private Residence/Average Daily Census	18.4	124.8	0.15	61.6	0.30
Residents Receiving Skilled Care	94.6	92.5	1.02	88.1	1.07
Residents Aged 65 and Older	100.0	91.8	1.09	87.8	1.14
Title 19 (Medicaid) Funded Residents	56.8	64.4	0.88	65.9	0.86
Private Pay Funded Residents	43.2	22.4	1.93	21.0	2.06
Developmentally Disabled Residents	2.7	1.2	2.27	6.5	0.42
Mentally Ill Residents	59.5	32.9	1.81	33.6	1.77
General Medical Service Residents	2.7	22.9	0.12	20.6	0.13
Impaired ADL (Mean)*	54.6	48.6	1.12	49.4	1.10
Psychological Problems	51.4	55.4	0.93	57.4	0.90
Nursing Care Required (Mean)*	7.1	7.0	1.01	7.3	0.97